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ATTN: INTELLECTUAL PROPERTY DEPARTMENT
DOCKETING
28 STATE STREET | 10/12/2005 CCHAU2 00000078 501133 10706223
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Keiko Nakagawa	(Depositor's name)
<i>Keiko Nakagawa</i>	(Signature)
<i>10-6-2005</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/706,223	11/12/2003	Ssang-gi Kim	AJUL-110DV (49921-037)	6316

TITLE OF INVENTION: COLORED CONTACT LENS AND METHOD FOR MANUFACTURING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	10/17/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
VARGOT, MATHIEU D		1732	264-001700		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	McDermott Will & Emery LLP
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2 _____
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MI Gwang Contact Lens Co., Ltd.

Kyungsan City, Republic of Korea

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Issue Fee
 Publication Fee (No small entity discount permitted)
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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number **50-1133** (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____

Date **6 OCT 2005**

Typed or printed name **Mark G. Lappin**

Registration No. **26,618**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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ATTORNEY DOCKET NO. AJUL-110DV (49921-037)
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant	Ssang-gi KIM
Serial No.	10/706,223
Filed	November 12, 2003
Title	Colored Contact Lens and Method for Manufacturing the Same
Examiner	Mathieu D. Vargot
Group Art Unit	1732
	Date Due: October 17, 2005
	Confirmation No. 6316

MS: Issue Fee
Commissioner for Patents
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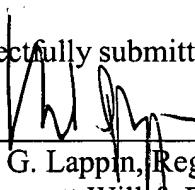
Dear Sir:

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- Issue Fee Transmittal Form (Part B); and
- Return Postcard

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Respectfully submitted,

By: 

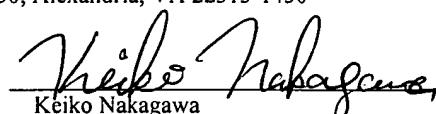
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Date: October 6, 2005

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10-6-2005
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Keiko Nakagawa